

# Retail Food Inspection Report

Telephone (812) 948-4726

<b>Establishment Name</b> V.F.W. NO. 3281		<b>Telephone Number</b> Est 812-945-6685 Own 812-945-6685		<b>Date of Inspection</b> 07/29/2021	<b>ID#</b>
<b>Address</b> 232 EAST FIFTH STREET, NEW ALBANY IN 47150		<b>Purpose</b> <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list)		<b>Follow Up</b>	<b>Released</b> 08/08/2021
<b>Owner</b> V.F.W. POST 3281				<b>Menu Type</b> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input checked="" type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/>	
<b>Owner's Address</b> 232 EAST FIFTH STREET NEW ALBANY, IN 47150-					
<b>Person in Charge</b> JACOB DOMALEWSKI					
<b>Responsible Person's Email</b> VFWFLOYD@MW.TWCBC.COM					
<b>Certified Food Handler</b> KATHY KELLAMS					
<small>CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"  VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRAIVE COLUMN MARKED AS "R"</small>					
<b>Section #</b>	<b>C</b>	<b>NC</b>	<b>R</b>	<b>Narrative</b>	<b>To Be Corrected</b>
218		X		Observed lightbulb out in fume hood.	1 week
<b>Summary of Violations</b> C <u>0</u> NC <u>1</u> R <u>0</u>					
Received by (name and title printed):			Inspected by (name and title printed):		
			Thomas Snider CFS		
Received by (signature):			Inspected by (signature):		
			<i>Thomas Snider</i>		
cc:		cc:		cc:	